

**Board of Zoning Appeals  
Board of License Commissioners**  
410-386-2094  
Fax: 410-386-2444  
1 -888-302-8078  
MD Relay Service – 7-1-1/800-735-2258



**Office of Administrative Hearings**  
Carroll County Government  
225 North Center Street  
Westminster, Maryland 21157-5194

## **TO: APPLICANTS TO THE BOARD OF ZONING APPEALS**

### **RE: FILING OF APPLICATION FOR HEARING**

An Application for Hearing must be filed with the Board of Zoning Appeals Office in Room 113 of the County Office Building. The fee is determined according to the attached Fee Schedule . Applicants are responsible for providing the required information and plans, which must be legible, correct, and complete. Please note the following in completing your application:

- If the lot or tract is part of a recorded subdivision, a copy of the recorded plat must be filed with the application.
- Photographs are required depicting the specific area involved in this application.
- The staff of the Board of Zoning Appeals Office may provide assistance; however, staff is unable to provide legal advice and the handling of the application is the Applicant's responsibility.
- **Incomplete applications shall be rejected as required by the Code of Public Local Laws and Ordinances, Section 223-188(D)**

Applicants who do not own the property must attach a copy of the document confirming their legal interest in the property; e.g., contract of sale, lease, or other evidence of their right to file an application.

**CARROLL COUNTY BOARD OF ZONING APPEALS  
APPLICATION FOR HEARING**

Application for Hearing is hereby made to the Board of Zoning Appeals Office, Room 113 of the Carroll County Office Building, as provided by the Code of Public Local Laws and Ordinances, Section 223-188, and the Rules of Organization and Procedure for the Board of Zoning Appeals.

**(PLEASE PRINT OR TYPE)**

Applicant: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address: \_\_\_\_\_

Address of Property: \_\_\_\_\_

Owner of Property  
If other than  
Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

If not Owner, Legal Interest in Property  
(Contract Purchaser, Lessee, etc.) \_\_\_\_\_

Attorney: \_\_\_\_\_ Phone No. \_\_\_\_\_

Address: \_\_\_\_\_

Property Acct. No. \_\_\_\_\_ Election District \_\_\_\_\_ Tax Map: \_\_\_\_\_ Block/Grid: \_\_\_\_\_ Parcel: \_\_\_\_\_

Subdivision Name: \_\_\_\_\_ Section: \_\_\_\_\_ Lot: \_\_\_\_\_

Plat Book: \_\_\_\_\_ Page: \_\_\_\_\_ Liber: \_\_\_\_\_ Folio: \_\_\_\_\_

**(Check one) Side(s) of the Road**                      **Road Name:**  
\_\_\_\_ North    \_\_\_\_ East    \_\_\_\_ West    \_\_\_\_ South                      of: \_\_\_\_\_

About (distance): \_\_\_\_\_                      \_\_\_\_ North    \_\_\_\_ East    \_\_\_\_ West    \_\_\_\_ South                      of:

Road Name: \_\_\_\_\_

Zoning Map: \_\_\_\_\_ Zoning Type: \_\_\_\_\_ Acreage of Lot: \_\_\_\_\_

**Public Facilities:**    \_\_\_\_ Sewer    \_\_\_\_ Water                      **Private Facilities:**    \_\_\_\_ Septic    \_\_\_\_ Water

**Explain Request:**

☐ **CONDITIONAL USE** for \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
  
**Basis: Code of Public Local Laws and Ordinances, Section/s:** \_\_\_\_\_

☐ **VARIANCE** (The purpose of the request and the amount of variance needed, i.e., the difference between what the law requires and what exists, or will exist on the property).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Basis: Code of Public Local Laws and Ordinances, Section/s:** \_\_\_\_\_

☐ **EXPANSION OF NON-CONFORMING USE** (Include what will be submitted to prove the length of time of the non-conformity, the current use and the proposed use:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Basis: Code of Public Local Laws and Ordinances, Section/s:** \_\_\_\_\_

## APPLICATION FOR HEARING PLOT PLAT

The Applicant is responsible for providing the following information, drawn to scale, or submitting separate plans with this form. If this property appears on a recorded subdivision plat, use a copy of the plat to prepare the plot plan if possible. In any case, attach a copy of the recorded subdivision plat to this application.

g Attached g Not Applicable

To the left of all items below, check if applicable or not applicable to this application.

<u>Applicable</u>	<u>Not Applicable</u>	<u>Existing Conditions</u>
1.    ___	___	Shape and dimensions of the property (drawn to scale).
2.    ___	___	Location, dimensions, and identification of abutting public and private roads, including width of road right-of-way.
3.    ___	___	Existing buildings, structures, driveways, sidewalks, above ground utilities, parking areas, signs, outdoor lighting, etc.
4.    ___	___	Distances from existing buildings to all property lines (front, side, and rear).
5.    ___	___	Location of any on-site well or sewerage disposal system.
6.    ___	___	Location of natural features, including trees, bushes, streams, ponds, springs, wetlands, and steep slopes.

<u>Applicable</u>	<u>Not Applicable</u>	<u>Proposed Development</u>
1.    ___	___	Proposed buildings, structures, building additions, sheds, fences, driveways, parking areas (including type of proposed surface), signs, outdoor lighting, and access to public and private streets (including dimensions).
2.    ___	___	Distances from proposed building, structure, addition, sheds, fences, etc. to all property lines.
3.    ___	___	Location and dimension of proposed outdoor play area (for day care centers) and outdoor storage.
4.    ___	___	What is the current use of land and what is the proposed use(s).
5.    ___	___	Existing and proposed stormwater drainage easements and facilities.

<u>Applicable</u>	<u>Not Applicable</u>	<u>Proposed Development</u>
6.     —	—	Any additional site information that will assist in presentation of request, e.g., floor plans, renderings, schematics, building elevations.

If plot plan is larger than 8.5 inches by 11 inches, **please submit 8 copies** with application.

Plan prepared/completed by:\_\_\_\_\_

**APPLICATION FOR HEARING  
CERTIFIED LIST OF CONTIGUOUS PROPERTY OWNERS AND ADDRESSES**

The Applicant is responsible for the provision and certification of a list of all contiguous (adjoining) property owners and their mailing addresses including Tax Map, Block, and Parcel numbers, and any owners of property situated on the opposite side of any street or road from the property involved in this application, in order that notification of the public hearing can be forwarded to the owners by First Class Mail. (Code of Public Local Laws and Ordinances, Section 223-189) Attach additional sheets, if necessary. **This information can be obtained from the State Department of Assessments & Taxation located at 17 East Main Street, 2<sup>nd</sup> Floor, Westminster, Maryland, Monday through Friday 8:00 A.M. to 5:00 P.M.**

**PLEASE PRINT OR TYPE**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City/State/Zip: \_\_\_\_\_  
Tax Map: \_\_\_\_\_ Block: \_\_\_\_\_ Parcel: \_\_\_\_\_

# **APPLICATION FOR HEARING FILING FEE**

Tax-exempt institutions, including County agencies or departments, are exempt from the filing fee, but not hearing room rental costs.

As provided by Code of Public Local Laws and Ordinances, Section 223-193 and the County Commissioners of Carroll County, the filing fee is: **(according to FEE Schedule - attached)**

**(Please make check payable to: County Commissioners of Carroll County)**

- a. For administration, publication of legal notices , posting of public hearing notice and mailing costs:  
**(See attached Fee Schedule)**
- b. If this application is withdrawn before the Notice of Public Hearing has been published, one-half of the fee is refundable.
- c. If this application is withdrawn after the Notice of Public Hearing has been published, the fee and costs are not refundable.
- d. The Applicant/Appellant shall be responsible for the payment of costs for the rental of a hearing room having sufficient seating capacity to conduct the public hearing if the Board of Zoning Appeals determines that the seating capacity of the County Office Building is insufficient for the public hearing of this application. Payment shall be made to the County Commissioners of Carroll County within thirty days from receipt of a statement from the Board of Zoning Appeals of such costs.

**The Applicant consents to the posting of a Hearing Notice-189B and authorizes County officials to inspect the site at reasonable times and in a reasonable manner. (Code of Public Local Laws and Ordinances, Section 223-190(F) and 223-189**

**UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE PREPARED AND EXAMINED THIS APPLICATION, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE, CORRECT, AND COMPLETE.**

\_\_\_\_\_  
DATE

\_\_\_\_\_  
APPLICANT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ATTORNEY

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARTNERSHIP, FIRM OR CORPORATION

\_\_\_\_\_  
DATE

\_\_\_\_\_  
OFFICE AND TITLE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
OWNER OF PROPERTY  
(If different from Applicant hereby authorizing the application)

# CARROLL COUNTY BOARD OF ZONING APPEALS

## FEE SCHEDULE

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### **NON-CONFORMING USES**

### **FILING FEE**

Alterations, Enlargements, etc .....	\$360.00
Relocation of junkyard to other location .....	360.00
Change to another non-conforming use .....	360.00
All other requests .....	225.00

### **CONDITIONAL USES**

Communication towers or complexes .....	800.00
Gun clubs/shooting range .....	800.00
Airports, public .....	800.00
Airports, private .....	400.00
Landfills .....	800.00
Multi-family (including two-family) .....	400.00
Kennel (ten or more dogs) .....	400.00
Mobile home park .....	800.00
Mini-storage .....	800.00
Sheltered housing .....	400.00
Business uses in "I" Industrial zones .....	400.00
Petroleum storage tanks, two or more (above 1,000 gal.) .....	400.00
Contractor's equipment storage yards .....	400.00
Bituminous concrete mixing plants, etc .....	400.00
Sign painting shops .....	400.00
Auto body repairs and painting shop .....	400.00
Resident professional within a dwelling, if more than 3 employees .....	400.00
Extractive type industries .....	800.00
Liquid or dry fertilizer storage and/or sales .....	400.00
Retreat or conference centers .....	400.00
All other requests .....	225.00

### **VARIANCES**

Industrial .....	400.00
Commercial .....	400.00
Multi-family .....	400.00
Single-family .....	225.00
Other requests .....	225.00

### **ADMINISTRATIVE APPEALS**

Planning Commission .....	1,450.00
Zoning Administrator .....	225.00
Other requests .....	225.00

### **MISCELLANEOUS**

Reconsideration .....	400.00
Requests for extension of time .....	225.00
Other requests .....	225.00